

United States Of America
Department of Transportation - Federal Aviation Administration
Supplemental Type Certificate

Number SA2-145

This Certificate issued to Signature Flight Support Corporation,
a Delaware Corporation
7511 Lemmon Avenue, Hangar C
Dallas, TX 75209

certifies that the change in the type design for the following product with the limitations and conditions therefor as specified hereon meets the airworthiness requirements of Part 10 of the Civil Air Regulations.

Original Product Type Certificate Number: 807
Make: de Havilland
Model: DH-104

Description of Type Design Change:

Installation of commode-hassock in accordance with Dallas Aero Service Drawing List titled "Couch-hassock Installation-Dove Sheet #2, Rev. 1, dated 7/22/57.

Limitations and Conditions:

Compatibility of this modification with other previously approved modifications must be determined by the installer.

This certificate and the supporting data which is the basis for approval shall remain in effect until surrendered, suspended, revoked or a termination date is otherwise established by the Administrator of the Federal Aviation Administration.

Date of application: July 22, 1957

Date reissued: 6/1/92; 12/21/98; 8/31/00

Date of issuance: May 02, 1957

Date amended: 9/25/57; 12/5/68;
11/12/69; 2/23/72; 4/2/79; 1/5/82
Rev. 6



By direction of the Administrator

for 
(Signature)

S. Frances Cox
Manager, Special Certification Office,
Southwest Region

(Title)

Any alteration of this certificate is punishable by a fine of not exceeding \$1,000, or imprisonment not exceeding 3 years, or both.

INSTRUCTIONS: The transfer endorsement below may be used to notify the appropriate FAA Regional Office of the transfer of this Supplemental Type Certificate.

The FAA will reissue the certificate in the name of the transferee and forward it to him.

TRANSFER ENDORSEMENT

Transfer the ownership of Supplemental Type Certificate Number _____

to *(Name of transferee)* _____

(Address of transferee) _____
(Number and street)

(City, State, and ZIP code)

from *(Name of grantor) (Print or type)* _____

(Address of grantor) _____
(Number and street)

(City, State, and ZIP code)

Extent of Authority (if licensing agreement): _____

Date of Transfer: _____

Signature of grantor *(In ink)*: _____